



Application No.: 10/695,271
Response to Office Action of December 21, 2004
Attorney Docket: TGEDE-007A

IPW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:	Tewodros Gedebou)	Confirmation No.	4698
)		
Serial No.:	10/695,271)	Art Unit:	3732
)		
Filed:	October 28, 2003)	Examiner:	Annette R. Reimers
)		
For:	COMPREHENSIVE TISSUE)		
	ATTACHMENT SYSTEM)		

**RESPONSE TO OFFICE COMMUNICATION AND CLARIFICATION OF
APPLICANT'S RESPONSE TO RESTRICTION REQUIREMENT**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Madam:

In response to the Office communication dated December 21, 2004, in relation to the above-identified patent application, Applicant hereby clarifies its response to the Restriction Requirement mailed November 12, 2004, as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

ATTORNEY DOCKET NO: TGEDE-007A
TITLE: COMPREHENSIVE TISSUE ATTACHMENT SYSTEM

SERIAL NUMBER: 10/695,271 FILED: OCTOBER 28, 2003



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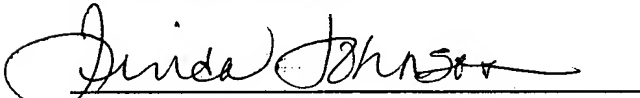
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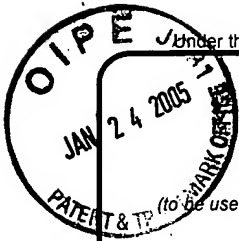

(Signature)

LINDA JOHNSON
(Typed name of person signing certificate)

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**TRANSMITTAL
FORM**

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/695,271
	Filing Date	OCTOBER 28, 2003
	First Named Inventor	TEWODROS GEDEBOU
	Art Unit	3732
	Examiner Name	ANNETTE R. REIMERS
Total Number of Pages in This Submission	Attorney Docket Number	TGEDE-007A

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): *Please charge any additional fees or credit any overpayment to Deposit Account No. 19-4330.
Remarks Response to Restriction Requirement; Certificate of Mailing; Return Receipt Postcard		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	MATTHEW A. NEWBOLES STETINA BRUNDA GARRED & BRUCKER
Signature	
Date	1/19/05

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